

# **Effective 1/1/2009**

# **Introducing a New Superior Vision Plan Option Provided through** NCFlex Benefit Program

## **Outline of Benefits**

Monthly Rates: Employee Only \$9.98

> **Employee** and Family \$25.10

**\$20 Exam Co-payment:** 

\$25 Contact Lens Fitting Exam Fee

**In-network co-pay:** Paid to the in-network provider.

	In-Network	Out-of-Network
Comprehensive Exam Ophthalmologist (MD)	Covered in Full	Up to \$44
Comprehensive Exam Optometrist (OD)	Covered in Full	Up to \$39
Standard Lenses:		
Single Vision	Covered in Full	Up to \$34
Bifocal	Covered in Full	Up to \$48
Trifocal	Covered in Full	Up to \$64
Lenticular	Covered in Full	Up to \$88
Contact Lenses:*		
Medically Necessary	Covered in Full	Up to \$210
Cosmetic-Elective**	Up to \$150	Up to \$100
Standard Contact Lens	•	-
Fitting Exam Fee***	Covered in Full	Not Covered
Specialty Contact Lens		
Fitting Exam Fee***	Up to \$50	Not Covered
Frames-Standard**	Up to \$150	Up to \$81

<sup>\*</sup> Contact lenses are in lieu of eyeglass lenses and frames benefit.

### **Plan Frequency**

Comprehensive Exam	12 Months
Lenses	12 Months
Frames	12 Months
Contact Lenses	12 Months

Note: This is only a summary of the benefit plan. You may review and/or obtain a copy of the certificate of coverage by contacting your Human Resources/Employee Benefits office.

# **Discount SVP8-20**

These discounts apply to upgrades on the covered frame and lenses only. For discounts on additional pairs, please refer to the Discounts on Additional Purchases.

**Frames** 20% off the difference between the covered frame

allowance and the retail price of the selected frame.

Note: Discounts do not apply when prohibited by the manufacturer.

# Add-ons to the covered pair of lenses

#### Lens Options and Upgrades Member pays 20% off retail up to

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<ul> <li>Scratch Coat (Factory)</li> </ul>	\$13(Single Vision & Standard Lined Multifocal Lense
<ul> <li>Ultraviolet Coat</li> </ul>	\$15(Single Vision & Standard Lined Multifocal Lense
• Standard Anti-Reflective Coat*	\$50(Single Vision & Standard Lined Multifocal Lense
• High Index 1.6*	\$55(Single Vision Lenses Only)
<ul> <li>Polycarbonate</li> </ul>	\$40\$(Single Vision Lenses Only)
<ul> <li>Standard Photochromic</li> </ul>	\$80 <sub>(Single Vision Lenses Only)</sub>
<ul> <li>Plastic Tints solid or gradient</li> </ul>	\$25(Any Type Lenses)
<ul> <li>Glass coloring</li> </ul>	\$35(Any Type Lenses)
	Member pays
• Power over 4.00 Sphere, 2.00D	20% discount off retail
Cylinder & 5.00D Prism	
<ul> <li>Cosmetic Finishing, Beveling,</li> </ul>	20% discount off retail

Edging & Mounting

• All other Lens Options/Upgrades 20% discount off retail

Higher end or brand name lens upgrades are at an additional expense to the member. You may apply the maximum out of pocket expense toward the upgraded lens retail cost and the member is responsible for the difference less

Progressive Power Lens Benefit (no-line): The member pays the difference between the provider's price for Standard Trifocal lenses and the price of the progressive power lenses selected, less 20%.

View your benefits and provider listings at www.superiorvision.com.

Contact lenses can be purchased on-line and delivered directly to your door. Visit www.svcontacts.com for more information.

For assistance with using your plan, please contact Customer Service at (800) 507-3800.

#### **Discounts on Additional Purchases**

Prescription eyeglass lenses 30% off retail All other prescription materials 20% off retail Add-on charges to basic lenses 20% off retail Eyeglass frames 30% off retail Contact lenses (except disposables) 20% off retail Everyday "frame and lens" Disposable contact lenses 10% off retail package pricing" 20% off retail

Discounts are provided by Superior Vision contracted providers identified in the provider directory with a "DP".

Refractive Surgery Discounts & Cosmetic Eyelid Surgery Discounts are available: Superior Vision Services has a nationwide network of refractive surgeons who specialize in the popular elective procedures of radial keratotomy (RK), photo-refractive keratotomy (PRK) and LASIK. These providers offer Superior Vision Plan members a 20% discount off their usual and customary surgical fees for these procedures. Ophthalmic plastic surgeons are also contracted to provide the procedure of blephoraplasty (cosmetic eyelid surgery) to Superior Vision Plan members on the same discount basis.



<sup>\*\*</sup>The insured is responsible for paying any charges in excess of this allowance.

<sup>\*\*\*</sup>Standard contact lens fitting fee applies to an existing contact lens user who wears disposable, daily wear, or extended wear lenses only. The specialty contact lens fitting fee applies to new contact lens wearers and/or a member who wears toric, gas permeable, or multi-focal lenses. For the specialty fit, the member is responsible for any charges over \$50.